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DECLARATION FOR UTILITY OR		PHUS0304461	JS2			
DESIGN	First Named Inventor	LEUSSLER, et a	u.			
PATENT APPLICATION	COMPLETE IF KNOWN					
(37 CFR 1.63)	Application Number					
Declaration Declaration	Filing Date					
Submitted OR Submitted after Initial	Art Unit					
With Initial Filing (surcharge Filing (37 CFR 1.16 (e))	Examiner Name					
required)	2503,11101110					
I hereby declare that:						
Each inventor's residence, mailing address, and citizenship a	are as stated below next to	their name.				
I believe the inventor(s) named below to be the original and which a patent is sought on the invention entitled:	first inventor(s) of the sub	ect matter which is clai	med and for			
T	D (OHE) MDI					
RF COIL SYSTEM FOR SUPER HIGH FIELI	D (SUL) MKI					
(Title of	the Invention)					
the specification of which						
is attached hereto						
OR						
was filed on (MM/DD/YYYY) 11/18/2003	as United States /	Application Number or F	201 International			
Application Number 60/520,979 and was ame	nded on (MM/DD/YYYY)		(if applicable).			
l						
amended by any amendment specifically referred to above.						
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for						
continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.						
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent,						
inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one						
country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date						
before that of the application on which priority is claimed.						
Prior Foreign Application Foreign F Number(s) Country (MM/DD			Copy Attached?			
Number(s) Country (MM/DD	(TTTT) NOT C	laimed)	es No			
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Additional foreign application numbers are listed on a su	ipplemental priority data s	heet PTO/SB/02B attac	ched hereto.			

[Page 1 of 2]
This collection of information is required by 37 CFR 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

DECLARATION — Utility or Design Patent Application

				******	********		**********	
Direct all correspondence to:	8 5	r Number ode Label				OR	Corres	pondence address below
Name Thomas E. Kocovsky, Jr F	FAY, SHARPE	E, FAGAN	, MINNIC	CH & N	AcKEE	, LLP		
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US		216/861-	-5582		216/241-1666			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SOLE OR FIRST IN	VENTOR:		Пар	etition	has be	en filed for t	his unsig	ned inventor
Given Name (first and middle [if any]) Christoph G.	dle (if any))				Family Name or Symame LEUSSLER			
Inventor's Signature	4,14	! !U~	<u> </u>					Date
Residence: City	State	***************************************	***********	Coun	try		Citize	enship
HAMBURG			DE DE					
Mailing Address LÜTTENREDDER 34				************			•••••••	
City	State	***************************************	••••••	~~~~	ZIP			Country
HAMBURG					D-224	57		DE
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor								
Given Name					Fa	mily Name		······
(first and middle [if any]) Christian	************		**********		Pi	SUERCE	E	
Inventor's Signature Alba has Wol	llre							Date 0344-40
Residence: City	State			Coun			Citize	inship
NORDERSTEDT				6-3	-RM1	4NY	DE	
Mailing Address				***********	.~~~~~~~~~~	*************	eregenerations.	***************************************
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City	State				ZIP		Coun	try
MORDERSTEDT					D	35846	DE .	
Additional inventors or a legal ret	presentative are be	ing named on	the ONE	suppleme	ental shee	nt(s) PTO/SB/0	2A or 02LR	attached hereto.

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1__ of 1_

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Name of Additional Joint Inventor, if ar	ıy:	A petition has been f	iled for th	nis unsigned inventor		
Michael A. Given Name	MORICH Family Name or Surname					
Inventor's Signature	4.5			/4 Nov. 2003 Date		
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Mailing Address			,,			
_{City} MENTOR	OH State	44060 US ZIP Country		у		
Name of Additional Joint Inventor, if any:						
Given Zhiyong Name		Family Name ZHAI or Surname				
Inventor's Signature Zhan Migus	****			Date NOV 14, 2003		
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Mailing Address						
CLEVELAND City	OH State	44124 US ZIP Country		Y		
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor						
Gordon D. Given Name		DeMEE amily Name r Surname	STER			
Inventor's Signature Hadam A. Do	yezte		***************************************	Date Down zeros		
WICKLIFFE	OH	US	***************************************	US		
Residence: City State Country Citizenship 30175 OVERLOOK DRIVE Mailing Address						

Mailing Address	- AU	14000	110			
_{City} WICKLIFFE	OH State	44092 US ZIP Country				

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